



Language Access Plan

Nevada Department of Health and Human Services
(DHHS)

Division of Public and Behavioral Health (DPBH)

DPBH Language Access Liaison: Brittney Rosiles, MPH

POLICY

The Division of Public and Behavioral Health (DPBH) is committed to compliance with Nevada Senate Bill 318 and Title VI of the Civil Rights Act of 1964, 2 C.S. § 561 et seq. (Act 172 of 2006) in ensuring meaningful access to State services and programs for individuals with limited English proficiency (LEP) without discrimination based on race, color, gender, gender identity or expression, sexual orientation, religion, national origin, age, pregnancy, genetic information, domestic partnership, or disability in accordance with federal regulation and state law. The Language Access Plan provides communication of information contained in vital documents, including, but not limited to, consent forms, waiver of rights, financial benefit forms, etc. All certified interpreters, translators, and other aids must comply with this policy while being provided without cost to the persons served as well as being informed of the availability of such language assistance at no cost. This plan applies to all DPBH programs and services. All DPBH personnel are required to follow this plan when providing services to, or interacting with, individuals seeking language assistance or individuals with LEP.

Many Nevadans rely on programs and services provided through the DPBH to obtain vital information about their health and wellbeing. The U.S Department of Health and Human Services defines, an LEP person as someone who cannot speak, read, write, or understand the English language at a level that allows them to interact effectively with agency staff. A citizen maintains the right to self-identify as a LEP person. DPBH endorses the following policies:

- DPBH is committed to equity and will take all reasonable steps to provide LEP individuals with meaningful access to all its services, programs, and activities.
- DPBH, rather than the LEP individual, bears the responsibility for providing appropriate language services, regardless of the LEP individual's preferred language, at no cost to the LEP individual.
- DPBH staff at the specific points of contacts have the specific duty to identify and record language needs.
- Use of informal interpreters such as family, friends, of the persons seeking service, or other customers is not allowed. Minor children are prohibited from acting as interpreters.
- No DPBH staff may suggest or require that an LEP individual provide an interpreter to receive agency services.
- DPBH will designate one or more employees to be responsible for developing and biennially revising a language access plan.
- Assess existing needs of DPBH clients for language services, how DPBH is meeting those needs, and recommendations to expand DPBH language services in the language access plan.
 - Outline compliance of DPBH and any contractors, grantees, assignees, transferees, or successors with any existing federal or state laws and regulations and any requirements associated with funding received by your agency associated with language services and accessibility.
 - Review the ability of DPBH to make language services available during the Declaration Emergency for COVID-19
- DPBH will develop procedures to obtain the missing information to include in future revisions to the LAP.

- DPBH will be responsible for soliciting public comment regarding the initial LAP and each revision thereafter; making recommendations to the Legislature concerning statutory changes necessary to implement or improve the LAP; including any funding to implement the LAP.

PURPOSE AND AUTHORITY

The Language Access Plan (LAP) is required for the Division of Public and Behavioral Health (DPBH) to ensure meaningful access to individuals with Limited English Proficiency (LEP) to the agencies offered programs and activities with accordance to Executive Order 13166, *Improving Access to Services for Persons with Limited English Proficiency*, issued August 11, 2000. In accordance with Title VI, Section 601 of the Civil Rights Act of 1964, U.S.C. 2000d, et seq, and its regulations, DPBH is required to offer language assistance with respect to services/benefits from or interactions with recipients of federal financial assistance. Further, all DPBH staff will inform children, youth, and families about the services available to them. Nevada's Senate Bill 318 (SB318) and the federal guidance on Title VI both agree that language should not be a barrier to accessing governmental programs and services. To ensure meaningful access for LEP persons to programs and activities, the DPBH will:

1. Conduct the four-factor analysis (Section IV)
2. Develop a language access plan (Section IV)
3. Implement the language access plan to provide appropriate language assistance (Section VI)

Following this plan and protocol is essential to the success of our mission to improve the health and wellness of Nevadans and visitors to our State.

AGENCY DESCRIPTION

A. Agency Background

The Nevada Division of Public and Behavioral Health (DPBH) is part of the Department of Health and Human Services (DHHS), under the Executive Branch of the State of Nevada. The DPBH is comprised of the former Health Division and Division of Mental Health and Developmental Services. On July 1, 2013, the two divisions merged to form DPBH. DPBH is organized into four branches, each overseen by a Deputy Administrator. The four branches are:

1. [Administrative Services Branch](#)

The Administrative Services Branch provides support to the Fiscal Office, the Office of Human Resources, and the Office of Informatics and Technology within the DPBH, and to provide information to the public in regard to the DPBH.

2. [Clinical Services Branch](#)

The Clinical Services Branch provides statewide inpatient, outpatient, and community-based public and behavioral health services to Nevadans. These locations include Behavioral Health Central Office Administration, Lakes's Crossing Center for Mentally

Disordered Offenders, Northern Nevada Adult Mental Health Services (NNAMHS), Southern Nevada Adult Mental Health Services (SNAMHS), and Rural Clinics and Community Health Services (RCCHS).

3. [Community Services Branch](#)

The Community Services Branch was established to develop relationships with community partners, including collaborating on resources that will improve public health and behavioral health outcomes for all communities within Nevada. These programs include Women, Infants and Children (WIC), Maternal, Child and Adolescent Health (MCAH), Nevada Immunization Program (IZ), Chronic Disease Prevention and Health Promotion (CDPHP), Office of Public Health and Informatics and Epidemiology (OPHIE), and HIV Prevention and Ryan White Part B.

4. [Regulatory and Planning Services Branch](#)

The Regulatory and Planning Services branch includes Health Facilities, Medical Laboratories, Musical Therapist Licensing, Dietitian Licensing, Child Care Licensing. This branch also includes the Bureau of Health Protection and Preparedness (HPP) and the Environmental Health Section (EHS).

It is the mission of the DPBH to protect, promote, and improve physical and behavioral health of the people of Nevada. Within DPBH, there are several sections offer programs and services directly as well as in partnership with Community-Based Organizations. A list of DPBH sections and programs is enumerated in the table below.

| Section Name: | Program Name: |
|---|--|
| Behavioral Health – Inpatient and Outpatient Services | <ul style="list-style-type: none"> • Clinical Medical Records • Clinical Behavioral Services |
| Behavioral Health Wellness and Prevention | <ul style="list-style-type: none"> • HIV Prevention • Ryan White Part B • Substance Abuse Prevention and Treatment Agency (SAPTA) • Behavioral Health Services Planning • Problem Gambling Services |
| Chronic Disease Prevention and Health Promotion | <ul style="list-style-type: none"> • Alzheimer's & Related Dementias Program • Comprehensive Cancer (CCCP) • Women's Health Connection (WHC) • Diabetes Prevention and Control (Diabetes) • Heart and Stroke Prevention and Control (Heart) • Wellness and Prevention Program (WPP) • Tobacco Control Program (TCP) |

| | |
|--|--|
| | <ul style="list-style-type: none"> • WISEWOMAN Program • Worksite Wellness (WW) • Health Equity Program |
| Clinical Services – Administrative Departments | <ul style="list-style-type: none"> • Clinical Admin Department Business Office • Clinical Admin Department Quality Assurance/Performance Improvement • Clinical Admin Department Human Resources • Rural Clinics Administration |
| Community Services | <ul style="list-style-type: none"> • Clinical Case Management • Clinical Community Nursing • Clinical Consumer Assistance Program (CAP)/Peer Support Programs • Clinical Counseling Programs Co-Occurring Programs: Dual Success & Recovery Program • Clinical Court Partnership Programs • Clinical Drop-in Center • Clinical Medication Management • Clinical Mobile Outreach and Safety Team • Clinical Program for Assertive Community Treatment (PACT) |
| Health Planning & Primary Care Office | <ul style="list-style-type: none"> • Primary Care Office • Certificate of Need • National Health Service Corps and Nurse Corps Programs • National Interest Waiver Program • Nevada Conrad 30/J-1 Physician Visa Waiver Program • Shortage Area Designations (HPSAs and MUA/Ps) |
| Immunizations | <ul style="list-style-type: none"> • COVID-19 Vaccine <ul style="list-style-type: none"> ◦ Pharmacy Depot Program • Vaccines for Children (VFC) Program • Nevada WebIZ • HL7 Interfacing • Cocooning Program • Perinatal Hepatitis-B Prevention • Vaccine-Preventable Diseases • Special Immunization Projects • Influenza |

| | |
|---|---|
| | <ul style="list-style-type: none"> • School and Child Care Facility Immunizations |
| Maternal, Child, and Adolescent Health (MCAH) | <ul style="list-style-type: none"> • Teen Pregnancy Prevention - Personal- Personal Responsibility Education Program (PREP) • Sexual Risk Avoidance Education Program (SRAE) • Early Hearing Detection and Intervention (EHDI) • Nevada Home Visiting (MIECHV) • Title V MCH Program <ul style="list-style-type: none"> ○ Rape Prevention and Education (RPE) ○ Maternal Infant Program (MIP) ○ Child and Youth with Special Health Care Needs (CYSHCN) ○ Adolescent Health and Wellness Program (AHWP) |
| Office of Food Security | <ul style="list-style-type: none"> • Food Security |
| Office of Vital Statistics | <ul style="list-style-type: none"> • Birth and Death Records, Marriage and Divorce Searches |
| Oral Health | <ul style="list-style-type: none"> • Oral Health |
| Public Health Preparedness | <ul style="list-style-type: none"> • Are you Prepared? • Healthcare Preparedness Program (HPP) • Healthcare Requesting Procedures • Nevada Health Alert Network (NVHAN) • Nevada Trauma Registry • Public Health Emergency Preparedness (PHEP) Program • Public Health Preparedness Program (PHP) • SERV-NV (Volunteer!) • Community Assessment for Public Health Emergency Response (CASPER) |
| Office of Suicide Prevention | <ul style="list-style-type: none"> • Suicide Prevention |
| Women, Infants, & Children (WIC) | <ul style="list-style-type: none"> • Women, Infants & Children (WIC) |

LAP PROCEDURES

Introduction

The DPBH recognizes the population eligible to receive its services includes Limited English Proficient (LEP) individuals. As DPBH provides a wide range of service to its diverse population, it is important agency staff are equipped to serve individuals that face an English language barrier. DPBH has a diverse collection of programs that provide services for Nevada communities and each program has its own set of needs and procedures to serve the LEP community. On July 28, 2022, each program completed an LAP survey with questions related to Language assistance services, resources, and protocols. The survey responses contributed to the content of this LAP.

The DPBH Language Access Coordinator is responsible for the development and maintenance of the LAP to include:

- Act as the Liaison and oversee the DPBH Language Access Plan
- Facilitate meetings with DPBH programs and leadership to obtain necessary data and information to comply with all Senate Bill 318 requirements
- Draft the LAP and incorporating feedback from the DPBH
- Solicit public feedback
- Train staff on how to utilize language assistance services when serving LEP persons;
- Coordinate and manage requests for interpretation and translation;
- Finalize the plan to include funding impacts, receive Administrator approval, and submit with the agency recommended biennial budget; and
- Review, monitor, and make revisions to the plan on a biennial basis, to ensure continued responsiveness to community needs and compliance with the Senate Bill 318.

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| DPBH Language Access Coordinator |
| Brittney Rosiles, Health Equity Project Manager brosiles@health.nv.gov |

The DPBH Program Managers/Chiefs of all program areas are responsible for implementation of the LAP to include:

- Making recommendations to the Legislature concerning statutory changes necessary to implement or improve the DPBH language access plan;
- Active participation in the LAP meetings and decision making;
- Implementation and oversight of the LAP for their respective programs and staff/contractors, including providing training to new staff;
- Managing a budget to provide language assistance services; and
- Regularly assess and improve the language assistance services provided by DBPH

This LAP is aligned to the DPBH population demographics, accessibility goals, and requirements established in Senate Bill 318. This plan serves to address the DPBH) responsibilities as a State agency to provide meaningful access to LEP Nevadans, including

individuals with disabilities requiring information tailored to their needs, such as American Sign Language (ASL) LEP persons will be provided language services through the use of culturally competent and bilingual DPBH staff, DPBH staff interpreters, contractors/vendors, subgrantees, and agreements with local organizations to provide interpretation and translation services, or online and telephonic interpretation services. Language services should be provided by persons who are qualified bilingual or multilingual staff or dual-role interpreters. All sign language interpreters and Communication Access Realtime Translation (CART) providers must be registered through the Nevada Interpreter/CART Registry to practice in the State of Nevada (NRS 656A.800).

Four Factor Analysis

The DPBH Language access plan includes a Four Factor Analysis that will influence the proposed actions for the implementation of the LAP. Each factor is examined below, as they pertain to DPBH programs and services. The Four Factors are:

1. The number or proportion of LEP persons served or encountered in the eligible service population.
2. The frequency with which LEP persons come into contact with the DPBH.
3. The nature and importance of the program, activity, or service provided by the program.
4. The resources available and costs to the recipient.

Factor 1: The number or proportion of LEP persons served or encountered in the eligible service population.

To identify the language needs of those individuals the DPBH is most likely to encounter and require language assistance, the DPBH language access coordinator examined external sources of data including the U.S Census Bureau data. The table below was used to determine the primary languages spoken as well as English Proficiency within the Nevada population. It was determined that between 2009-2013, there were a total of 747,387 individuals that speak a language other than English at home. Of that same population, 317,113 speak English less than “very well.” Out of the 517,933 individuals that speak Spanish and Spanish Creole, 230,366 also speak English less than “very well.” Of the 63,079 individuals who speak other Indo-European Languages, 17,994 speak English less than “very well.” Out of the 142,667 individuals who speak Asian and Pacific Island Languages, 60,286 speak English less than “very well.” Among the 23,708 individuals who speak all other languages, 8,467 speak English less than “very well.”

Table 1

Detailed Languages Spoken at Home and Ability to Speak English for the Population 5 Years and Over for Nevada: 2009-2013. Release Date: October 2015.

| Primary Language Spoken | Number of Speakers | Speak English less than “very well” | % Of Population, Speak English less than “very well” |
|------------------------------------|--------------------|-------------------------------------|--|
| Spanish and Spanish Creole | 517,933 | 230,366 | 72.6% |
| Asian and Pacific Island Languages | 142,667 | 60,286 | 19.0% |

Table 1

Detailed Languages Spoken at Home and Ability to Speak English for the Population 5 Years and Over for Nevada: 2009-2013. Release Date: October 2015.

| | | | |
|-------------------------------|--------|--------|-------|
| Other Indo-European Languages | 63,079 | 17,994 | 5.67% |
| All Other Languages | 23,708 | 8,467 | 2.67% |

*Populations exceeding the Safe Harbor Threshold: 5% or 1,000 (whichever is less) of populations of persons eligible to be served or likely to be affected. Safe Harbor Threshold: LEP Language group that constitutes 5% of the total population or 1,000 individuals (whichever is less) of the populations of persons eligible to be served or likely to be affected or encountered.

Additionally, data was analyzed from the National Center for Education Statistics regarding public schools in Nevada to capture the number or proportion of students who are English Language Learners in Nevada by race/ethnicity and are likely to require language assistance. In 2017-2018, approximately 82,173 students were identified as English Language Learners within their schools. 87.7% of the total population of English Language Learner students identified as Hispanic or Latino.

Table 2

Number and Percentage of Public-School Students Who are English Language Learners, by race/ethnicity by State (Nevada): School Year 2017-18

| Race/Ethnicity | Number of Students | Percent % of Students |
|---|---------------------------|------------------------------|
| American Indian or Alaska Native | 176 | 0.2% |
| Asian | 5,153 | 6.3% |
| Hispanic or Latino of any race | 72,038 | 87.7% |
| Black or African American | 1,342 | 1.6% |
| White | 2,441 | 3.0% |
| Native Hawaiian or Other Pacific Islander | 552 | 0.7% |
| Two or More Races | 471 | 0.6% |
| Total | 82,173 | 100% |

Profile of DPBH’s LEP Clients

The DPBH language access coordinator examined the U.S Census Bureau, American Community Survey Table 2: Nevada QuickFacts: Race and Hispanic Origin, to determine demographic characteristics within the Nevada population. It was determined that the total population estimate in July of 2021 was 3,143,991 in Nevada. Of the total population, the highest racial demographic in Nevada was among White alone (73.9%) and second highest was White alone, not Hispanic or Latino (48.2%).

Table 3

Population Estimates: Race and Hispanic Origin in Nevada (July 2021)

| Race and Hispanic Origin | Percent % Population |
|--|-------------------------|
| White | 73.9% |
| Black or African American | 10.3% |
| American Indian and Alaska Native | 1.7% |
| Asian | 8.7% |
| Native Hawaiian and Other Pacific Islander | 0.8% |
| Hispanic or Latino | 29.2% |
| White, Not Hispanic or Latino | 48.2% |
| Two or More Races | 4.6% |

* Relevant Demographics of Persons Served by/Eligible to Receive Services in Nevada

Further, the DPBH liaison examined the Nevada State Immigration Data Profile to determine the demographics of Nevadans that are foreign-born by U.S Citizenship Status, Naturalized Citizens, and Citizens. The highest number of Nevadans (337,636) that are foreign-born are born in Latin America.

Table 4

Nevada State Immigration Data Profiles: Demographics and Social (2019)

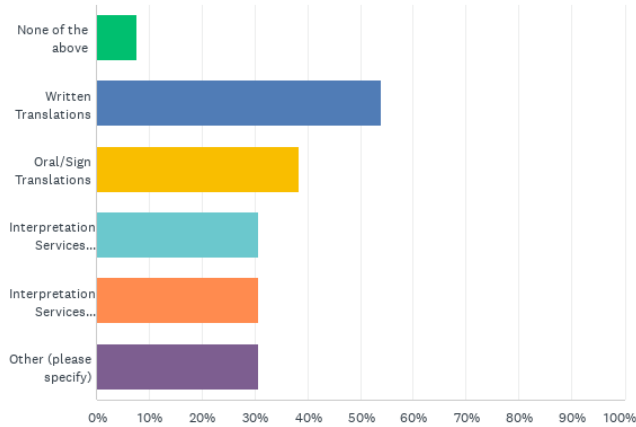
| Region of Birth (excluding born at sea) | Foreign Born | |
|---|--------------|---------|
| | Number | Percent |
| Born in Africa | 22,644 | 3.7% |
| Born in Asia | 195,581 | 32.0% |
| Born in Europe | 40,453 | 6.6% |
| Born in Latin America | 337,636 | 55.3% |
| Born in Northern America | 10,719 | 1.8% |
| Born in Oceania | 3,619 | 0.6% |
| Foreign Born by U.S Citizenship Status | | |
| Naturalized Citizens | 309,276 | 50.6% |
| Noncitizens | 301,376 | 49.4% |

Factor 2: The frequency with which LEP persons come in contact with the DPBH.

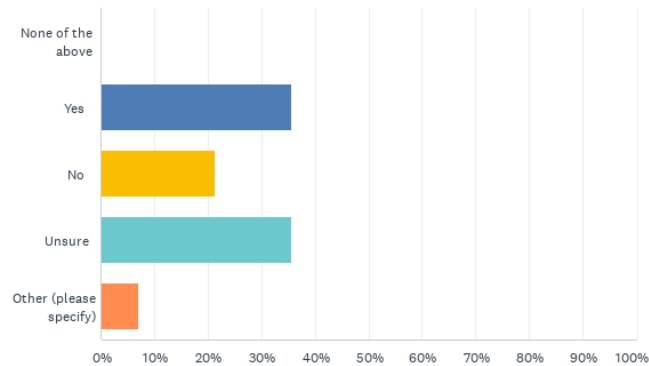
An internal DPBH survey was conducted to understand the frequency and methods of contact in which LEP persons come in contact with the DPBH programs and services offered. The purpose of the survey was for each program representative from DPBH to identify the types of language assistance services their program provides as well as the demographics of their LEP

clients. When asked “does your program provide direct services to LEP persons in Nevada?” 56.25% of programs responded “Yes,” whereas, 37.50% responded “No,” and 6.25% responded “Unsure.”

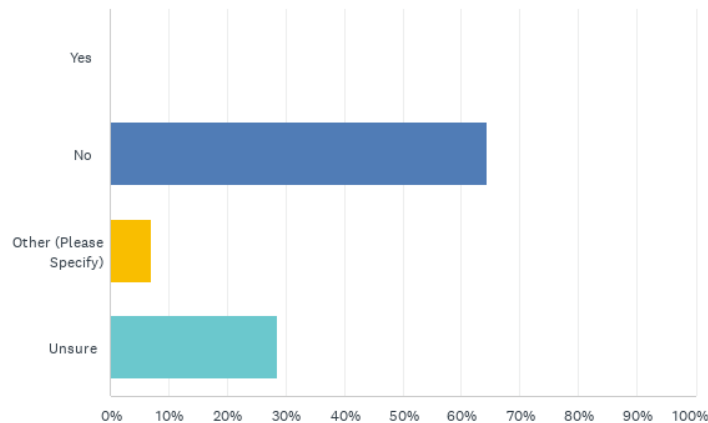
Q13 What type of LEP services are offered by your program? (Select all that apply)



Q16 Does your staff have access to trainings/resources on how to request language assistance for a client?



Q17 Does your program have staff that are certified to provide translation services to clients?



The results from the survey have been incorporated into a table to indicate which programs specifically, offer language assistance services, and the types of services they provide. The table below also includes if each program serves refugee populations and indigenous populations.

Table 5
DPBH Internal Language Access Survey Results July 2022

| Program Name | Services Provided | Does your program serve refugees/indigenous populations? | Are training/resources accessible for program staff? |
|---|---|--|--|
| Chronic Disease Prevention and Health Promotion | Interpretation Services (In-person, in-office), interpretation Services (online, over phone) Written Translations | No – Refugee Yes– Indigenous | Yes |
| Office of HIV/AIDS (Community Services Branch) | N/A | Both | Unsure |
| Lake’s Crossing Center (Clinical Services Branch) | N/A | N/A | N/A |
| SNAMHS and Rural Clinics | Written Translations, oral/Sign Translations, | Both | Yes |

| Program Name | Services Provided | Does your program serve refugees/indigenous populations? | Are training/resources accessible for program staff? |
|---|--|--|--|
| | interpretation Services (In-person, in-office) Interpretation Services (online, over phone) | | |
| Community Health Services Section, Administration | Translation services (vital documents) | Both | Yes |
| Office of Public Health Informatic & Epidemiology (OPHIE) | Written Translations Oral/Sign Translations | Both | No |
| Immunization Program | Written Translation and Oral/Sign Translations | Yes – Indigenous populations Unsure – Refugee persons | Yes |
| Nevada WIC | Written Translations, oral/Sign Translations, interpretation Services (in-person, in-office), interpretation Services (online, over phone) | Both | Yes |
| Maternal, Child, and Adolescent Health Section (MCAH) | Other (please specify): Translation of materials/documents | Yes – Indigenous populations No – Refugee persons | Other; an external language company is used. |
| Office of Vital Records | Interpretation Services (In-person, in-office), interpretation Services (online, over phone) | Yes – Indigenous populations No – Refugee persons | No |
| Office of Food Security and Wellness | Other (please specify): any services FHN providers need | Unsure to both | No |
| Clinical and Community Engagement | Written Translations, oral/Sign Translations | Yes – Indigenous populations | Unsure |

| | | | |
|----------------------------|----------------------|--|--|
| Program Name | Services Provided | Does your program serve refugees/indigenous populations? | Are training/resources accessible for program staff? |
| | | Unsure – Refugee persons | |
| Preventative Health | Written Translations | No to both | Yes |
| Public Health Preparedness | N/A | Yes – Indigenous populations | No |

When asked in the language access survey if any DPBH program representatives had any recommendations to expand language access, the following recommendations were given:

- To have access to all the services listed
- Translation services provided for every program, having the ability to expand Master Service Agreement contracts to every program automatically or have agencies under each program assessed individually for needs
- More access to interpreters when needed and help with translating our forms
- Easy access to one person who works for the State to provide services on demand
- Standing translation contract/phoneline
- Having an identified person at DPBH that can do written translation for forms, treatment plans, and other required paperwork for at least Spanish

Additionally, data was obtained from the DPBH website google analytics to understand the language preferences chosen by users in the month of June 2022. Several languages chosen include English, Spanish, German, and Chinese. The highest chosen language is English with Spanish and German as second and third highest chosen language. As part of improving language access within DPBH, the DPBH website will include a notice of availability of language services as well as “I speak” cards and a list of language services on the website. Translation of the website will be available with google translation and translated documents from a contracted translation provider.

| Language | Number of Users |
|--------------------------------|-----------------|
| en-us English (United States) | 45,061 |
| en-gb English (United Kingdom) | 653 |
| en English | 293 |
| en-au English (Australia) | 119 |
| de-de German | 113 |
| es-us Spanish (United states) | 111 |
| en-ca English (Canada) | 102 |
| zh-cn Chinese (PRC) | 76 |

| | |
|--|--------|
| es-419 Spanish (Latin America and Caribbean) | 71 |
| es-es Spanish (Spain) | 63 |
| Total | 47,432 |

DPBH has Master Service Agreements (MSA) with several language assistance providers such as Language Link, Corporate Translation Services, Inc., Focus Language International, Homeland Language Services, Languages Translation Services, Las Vegas Interpreters Connection, LLC, and Preston Bass Interpreting.

All DPBH and contractors must follow procedures when engaging with DPBH constituents to identify their preferred language. By following the procedures below, DPBH can better provide meaningful, timely access to all services and programs without regard to any language barriers.

- Understand and follow the requirements of the LAP for DPBH staff
- Treat all constituents with dignity and respect regardless of background;
- Inform all constituents of the availability of language services
- Identify preferred language at the beginning of interaction;
- Record and track LEP constituents' language preferences; and
- Provide language access services in the LEP persons preferred language

Factor 2: The frequency with which LEP persons come in contact with the DPBH.

An internal DPBH survey was conducted to understand the frequency and methods of contact in which LEP persons come in contact with the DPBH programs and services offered. DPBH has Master Service Agreements (MSA) with several language assistance providers such as Language Link, Corporate Translation Services, Inc., Focus Language International, Homeland Language Services, Languages Translation Services, Las Vegas Interpreters Connection, LLC, and Preston Bass Interpreting.

All DPBH and contractors must follow procedures when engaging with DPBH constituents to identify their preferred language. By following the procedures below, DPBH can better provide meaningful, timely access to all services and programs without regard to any language barriers.

- Understand and follow the requirements of the LAP for DPBH staff
- Treat all constituents with dignity and respect regardless of background;
- Inform all constituents of the availability of language services
- Identify preferred language at the beginning of interaction;
- Record and track LEP constituents' language preferences; and
- Provide language access services in the LEP persons preferred language

Factor 3: The nature and importance of services provided by the DPBH.

DPBH will secure the following language access services to enable our LEP clients to access our services and programs more fully: oral/sign language services, written language services, interpretation services. In every case, DPBH ensures that all language service providers are fully competent to provide these services. Language assistance, services, and resources are provided by DPBH in-person, in-office, in-the-field, online, over the phone, and within documents. Online

services include telehealth, surveys, webinars, State website, emails, telephonic services, and contact tracing. In-person, in-office, and in-the-field services include in-person clinics, immunizations, screenings, health education, training, dental services, oral translation services, and “I Speak” cards. It is DPBH’s responsibility to provide effective means of communication to all clients in all languages -spoken or signed – to ensure all Nevadans have access to DPBH’s programs and services, including but not limited to dual-role interpreters, direct services providers, contract interpreters, etc.

Factor 4: The resources available to DPBH, and overall costs to provide LEP assistance.

DPBH will ensure that all access points to DPBH programs, services, and staff, offer language assistance for LEP individuals, such as:

- All DPBH offices statewide
- DPBH website
- DPBH media (social media, Public Service Announcements, Townhall Meetings, etc.)
- Outreach events
- Publications (printed materials, posters, brochures)
- Public Meetings (recordings, remote interpretation)
- Resources and Referrals

DPBH will make available identification cards or “I speak” cards or posters to determine the language and communication needs of LEP persons in Nevada. The DPBH website will be analyzed using Google Translate to capture which languages are chosen by DPBH clients. Additionally, as part of improving language access services moving forward, DPBH will keep records of LEP client’s preferred language and communication needs to provide language assistance each time by maintaining a list to track the languages and services requested. These tracking systems will ensure that DPBH staff can provide meaningful and timely assistance to LEP individuals.

Additionally, the DPBH conducted a town hall meeting to address language accessibility in Nevada and introduce the LAP planning to the public. This Town Hall was conducted in Spanish on August 18, 2022 and was made available to the public through Microsoft Teams and Facebook LiveStream. The recording of the Town Hall has been posted on our website.

All DPBH staff and contractors that currently serve or will serve LEP persons must meet State and/or national certification requirements. This includes required health equity and cultural competency trainings. DPBH supports professional development opportunities through continuing competency trainings in accordance with the [State of Nevada Administrative Manual \(SAM\)](#).

During initial orientation, the following trainings will be provided to all staff:

- Information on Title VI Civil Rights Act, American with Disabilities Act (ADA), Executive Order 13166, and Nevada Senate Bill 318 and Language Access for LEP populations.

- Description of language assistance services offered to the public
- Use of the “I speak” cards
- Definition of Limited English Proficiency (LEP), Language Assistance, Translation, Indigenous Persons, Refugee Persons, and more.
- Documentation process for language assistance requests.
- Cultural Competency training
- How to serve a potential LEP complaint

DPBH will use qualified oral language interpreters and translators when available and will offer the necessary credentials needed for staff currently identified as bilingual that are interested in receiving their certifications. However, the State of Nevada does not offer an Oral Language Certification program for State of Nevada employees as there is not Master Service Agreement or contracted certification vendors to offer this opportunity. A process is under review with the Division of Human Resource Management (DHRM) to address oral language interpreter certification for State of Nevada employees.

The compliance and qualifications for language assistance providers, contractors, etc. are listed below.

- Oral Language Service Providers: **NRS 232.08 (5)(b)**
- Communication Access Real-Time Translators (CART): **NRS 656A**
- Sign Language Interpreters: **NRS 656A**
- Translators: **NRS 232**

Obtaining Qualified Interpreters

DPBH will provide oral and sign language services to LEP Nevadans using direct service providers, staff interpreters, bilingual/multilingual staff, and contracted interpreters.

Oral Interpreter/Sign Language Interpreter Services:

Oral/interpreter/sign language interpreter services may be accessed via in-person, over the phone, and video-remote.

Interpreter services can be provided by:

- Trained/certified and competent bilingual staff or contractors that have been approved by DPBH and speak the individual’s primary language.
- Trained and competent Sign Language Interpreters and CART available from the Nevada State Purchasing Master Service Agreement (MSA) for Translation/Interpreters.
- Telephone language services available through Language Link Solutions Interpretive Services.

Written Language Services:

Written language services provide LEP individuals equitable access to crucial information related to health and services offered by DPBH. When determining if a document is considered vital information, DPBH will consider the following questions:

1. Could a LEP Nevadan access or participate in this program, activity, or service if they are unable to complete and/or understand the information in this document?
2. Could a LEP Nevadan be terminated from this program, service, or activity if they are unable to complete and/or understand the information in this document?
3. Could a LEP Nevadan suffer significant financial, physical, or other harm if they are unable to complete and/or understand the information in this document?

DPBH will provide translation services for vital documents for DPBH constituents and the public.

The following written materials are considered vital and will be translated by DPBH:

- Forms (Applications forms, benefits, resources, consent forms, complaint, waivers, release forms, and claims).
- Letters or Notices: eligibility criteria, rights, reduction, denial, termination of services, programs, benefits
- Time Sensitive Communication: Notices of deadlines related to hearings, investigations, litigation, commentary, feedback, and public hearings.
- Activities that Will Impact Nevadans: Traffic flow, public transportation, public services, office closures, road closures.
- Emergencies and Public Health: Emergency and crisis information, safety information, health information, evacuation instructions, COVID-19 mandates, and CDC COVID-19 updates.
- All Other Documents: Any additional documents that DPBH is required to translate and notices of availability of language services.

All documents will be submitted to the DPBH manager or supervisor, who will have the documents translated into the “safe harbor” languages, meeting all ADA guidelines. To determine which languages to translate vital information into, DPBH will follow the “safe harbor” provision described by the U.S Department of Health and Human Services in its Title VI guidance. A “safe harbor”, regarding language access, means that DPBH must undertake efforts to comply with respect to the needed translation of vital information. The DPBH Vital Document Inventory List was created to establish a system to maintain and revise the list of vital documents that must be translated as required by each program. Each program will be responsible for translating all existing and new documents or written materials to follow the “safe harbor” guidelines. Any written materials or vital documents in which DPBH does not own, the program will work with the authority to address the translation needs and updates (IDEA, WIC, CMS, etc.)

DPBH supervisors and managers are responsible for:

1. Obtaining a current list of availability of bilingual or multilingual staff, as well as staff interpreters from Human Resources including the name, phone number, language, and hours of availability. All updates should be provided to the Bureau Chiefs and shall distribute the information to all DPBH staff as it is updated.
2. Identify bilingual/multilingual staff who could be trained as interpreters or Dual-Role interpreters;

3. Notifying bilingual/multilingual staff and staff interpreters when interpretation services is needed, and,
4. Assist DPBH staff in obtaining an external interpreter if a bilingual staff member or staff interpreter is not available or does not speak the needed language.

DPBH recognizes it is not appropriate to utilize family members, including children, friends and acquaintances, and/or untrained volunteers as interpreters as it is out of compliance with Federal Title VI Guidelines, the ADA and Nevada's Senate Bill 318. This is considered a breach of confidentiality and could undermine honest and forthright communication with clients.

Providing Notice to LEP Persons

DPBH is committed to ensuring the larger LEP community is aware of and able to access all available language services. In doing so, DPBH has taken steps to publicize the availability of its language services in the community. DPBH has provided notification of its services at all relevant points of contact. Additionally, DPBH staff are required to inform LEP persons of the availability of language assistance, at no cost, by providing written notice in the LEP person's needed language. LEP persons will be notified of the availability of language services through the one or more of the following: the DPBH website, flyers, brochures, printed materials, "I speak" posters, telephonic messages, local radio and television, social media platforms, townhall, community forums, and/or community-based organizations. DPBH will ensure outreach materials for LEP persons is available in "safe harbor" languages, interpreters (oral/sign language) are provided during outreach activities including townhalls, and "I speak" cards are available to LEP persons. Additionally, the draft of the LAP will be posted on the DPBH for public comment for a two-week period. All feedback will be reviewed and incorporated into the final LAP. Once completed, the LAP will be available for public viewing on the DPBH website.

DPBH continues to strengthen relationships and make new partnership with external organizations such as community-based organizations to increase outreach, engagement, and information sharing by conducting the following activities:

- Solicitation of feedback on DPBH LAP and state plans
- DPBH presentations to boards/commissions and community organizations
- Surveys, Needs Assessments, and Reports
- Trainings
- DPBH participation in community events (townhalls, forums, educational webinars, etc.)

Staff Recruitment and Training

DPBH is committed to improving language access services and resources with qualified and trained staff.

Staff Recruitment

DPBH follows State of Nevada Division of Human Resource Management policies and procedures for all recruitments to ensure fair and equitable hiring practices. As part of the LAP, DPBH will recruit dual-role interpreters to meet appropriate language access resources to serve

constituents as needed. According to the internal DPBH survey, only 30.77% of programs who responded indicated that they offer interpretation services in-person and only 30.77% of programs who responded indicated they do offer interpretation service online and over the phone. DPBH will leverage MSA contracts to the extent funding is available to meet requirements and qualifications as certification becomes available to State of Nevada employees.

Currently, the State of Nevada, Human Resources Data warehouse does not currently capture data to identify DPBH staff who are bilingual interpreters and translators, and the languages they speak. As a recommendation, enhancements would be needed along with a legislative approved budget authority to address these requirements and ensure DPBH has access to data related to DPBH bilingual staff.

Training

To ensure equitable and timely language access services, as well as access to qualified and trained staff to provide these services, DPBH will ensure the availability of several trainings for DPBH staff and contractors such as:

- Training on DPBH language access policies for new employees during onboarding process by the hiring program;
- Specific training based on the staff member’s position and for direct-service work with the public;
- Cultural competency training incorporated into DPBH language access policies

IMPLEMENTATION AND EVALUATION OF THE DPBH LANGUAGE ACCESS PLAN

In order to implement this LAP, the DPBH language access coordinator has created a timeline of activities to conduct at the onset of this plan and monitor the progress. The activities are as follows:

| LAP Action Items | Timeline |
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| <p>Establish Contracts or Memorandums of Understanding for Translations services (verbal and written):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Seek translation services for language access needs within DPBH <input type="checkbox"/> Expand current contracts within DPBH to sustain language assistance services | By October 1, 2022 |
| <p>Distribution of LAP:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Promote availability of the LAP to DPBH and the public <input type="checkbox"/> Promote existing and planned resources for LEP clients | By October 1, 2022 |
| <p>Dissemination and Training:</p> | By October 1, 2022 By November 1, 2022 |

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| <ul style="list-style-type: none"> <input type="checkbox"/> Training DPBH LAP for Leadership/Managers, conducted by LAP coordinator. <input type="checkbox"/> Training on DPBH LAP for Program Mangers/Bureau chiefs conducted by LAP coordinator. | |
| <p>Complaint Procedures:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Develop, distribute, and post complaint procedures on DPBH website for LEP individuals to file a complaint. | <p>By December 1, 2022</p> |
| <p>Website Revisions:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Update Language access information and language assistance services/resources on the DPBH website. <input type="checkbox"/> Update website functionality to include language options | <p>By December 1, 2022</p> |
| <p>Data Collection:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Program managers/chiefs to mandate program-specific staff to record the individual’s primary language and English proficiency (to extent possible with current system capabilities). <input type="checkbox"/> System enhancements to establish a data collection system in program specific database (where absent). | <p>By December 1, 2022 Dependent on status of system enhancements and budget authority.</p> |
| <p>Development and Distribution of “I speak” Cards and Posters:</p> <ul style="list-style-type: none"> <input type="checkbox"/> LAP Coordinator to develop DPBH specific cards and posters for dissemination. | <p>By January 1, 2023</p> |
| <p>Vital Document Translation:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Program managers/chiefs will be responsible for ensuring that all vital documents are translated using qualified translators (to the extent funding is available). | <p>By January 1, 2023</p> |
| <p>Distribution of Materials:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Distribute all translated vital documents and all other translated materials in paper/electronically and | <p>By January 1, 2023</p> |

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| <p>on the website, for each program within DPBH.</p> | |
| <p>Policies and Procedures:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Develop, update, and disseminate a list of staff translators available within DPBH at points of public contact (including DPBH employee portal). <input type="checkbox"/> Administrative Language Access Service policy to be developed and housed in the DPBH employee portal. <input type="checkbox"/> Program policies to be updated with LAP procedures for intake/eligibility and housed in the DPBH policy portal. | <p>By January 1, 2023</p> |
| <p>Monitor and Update LAP Biannually:</p> <ul style="list-style-type: none"> <input type="checkbox"/> LAP coordinator will collaborate and meet with program managers/chiefs as well as leadership/bureau to discuss LAP progress and updates biannually. <input type="checkbox"/> LAP coordinator will monitor and update the LAP biannually. | <p>By January 1, 2023</p> |

The DPBH (LAP) demonstrates several limitations and barriers for DPBH to be fully compliant at the onset of this plan. This allows for further evaluation and improvement to ensure timely and meaningful language access services. DPBH is committed to monitoring the performance of the above policies, procedures, and resources to ensure that its LAP is responsive to the needs of both DPBH and the people it serves. At a minimum, DPBH will review, evaluate, and update its LAP (if needed) biennially to include:

- The LAP will be reviewed and updated with data from the previous year and incorporate any new U.S Census data as made available.
- The DPBH will maintain records of preferred languages of each person who receives services, types of services, or other needs that may be required of re-evaluation of this LAP and its procedures. These updates will be provided to the Deputy Administrator of DPBH.
- Solicit and monitor feedback from stakeholders (e.g., community partners, constituents, boards/commissions).

Additionally, DPBH will assess the efficacy of these procedures, including, but not limited to surveying staff to determine how often staff uses language access services, if there should be changes in the way services are provided and if DPBH language services are meeting the needs of LEP Nevadans. Lastly, DPBH will review the budget, funding opportunities, collaborations with other State agencies, Human Resources, and other mechanism to ensure further

improvement on LEP Nevadans' access to DPBH programs and services. Updates will be incorporated using data gained from reporting tools or by observations from staff such as:

- Number of documented LEP persons provided Language Link services in previous years
- Determination of the current LEP population in the service area
- How need of LEP person have been identified and addressed
- Determination as to whether the need for translation services has changed
- Improvements needed for review
- Determination of whether local language assistance programs have been effective and sufficient to meet the need
- Determination of whether the Department of Health and Human Services (DHHS) financial resources are sufficient to fund language resources needed
- Determination of whether DHHS fully complies with the goal of this LAP
- Determination of whether complaints have been received concerning the agency's failure to meet the needs of LEP individuals

Declared Emergency/Natural Disaster

Translation and interpretation services will be provided to communicate effectively to Nevadans, including, but not limited to LEP persons regarding declared emergency or natural disasters.

Providing this information in a language that the public can understand is essential for preparedness, response, and recovery. DPBH will provide meaningful access to LEP individuals in their preferred language during all declared emergency or natural disaster as follows:

- All staff/contractors/grantees will follow the policy for Disaster Preparedness and Emergency Response Policy.
- All DPBH emergency notifications/information will be translated;
- All DPBH emergency notifications via in-person or over public service announcements will include sign language interpreters;
- DPBH will provide oral interpreters in safety committees; and
- "I speak" cards will be distributed to assist responders in identifying languages spoken by a disaster victim.

Complaint Procedures

Any LEP individual has a right to file a complaint against the DPBH where the individual believes that the DPBH did not provide necessary LEP services as appropriate, and will be provided with a DPBH complaint form. The Language Access complaint form will also be available on the DPBH website. The language access coordinator will take reasonable steps to inform LEP individuals and stakeholders about the availability and where to find the complaint forms. All complaints, alleging a violation under Title VI will be referred to the language access coordinator:

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The language access coordinator will investigate whenever it receives a complaint, report, or other information that alleges or indicates noncompliance with Title VI. If the investigation results in a finding of compliance, the coordinator will inform the LEP individual in writing of this determination including the basics of the determination. If there is noncompliance, the following steps should be taken:

- Language access coordinator will inform the LEP individual of the noncompliance through a Letter of Findings
- The letter will set out the areas of noncompliance and the steps that will be taken to correct the noncompliance

The language access coordinator will maintain a database tracking all complaints and their resolution. The database will include the following items:

- Source of complaint
- LEP request including relevant contact information
- Nature of complaint/request received
- Date complaint/request resolved
- Manner of resolution
- Comments

The Language Access Coordinator will create and share an excel spreadsheet that will allow program supervisors and staff to review the deficiencies in interpretation services. Language access meetings and/or training are also ways language access complaints can be communicated to the program managers and bureau chiefs. These complaints should be discussed monthly.

Budget Implications and Legislative Recommendations

As a result of Senate Bill 318, each agency is required to submit their LAP and associated funding requests with the agencies proposed budgets pursuant to NRS 353.210. The DPBH assessment of the LEP population by program, resources, and needs are still under evaluation for the initial implementation of this LAP. Therefore, any fiscal impact for DPBH implementation of the LAP and compliance would need to be addressed in special consideration of the 82nd legislative session or in the following biennium (83rd legislative session).

Fiscal Impact and Future Budget Recommendations

The preliminary fiscal impact was developed using data from the DPBH LAP survey to address system enhancements, Information Technology (IT) staffing resources contracted translation services and contracted oral interpreter services. The fiscal impact demonstrated in this LAP would require work to conform to the budget build rules upon submittal during an Agency Budget Request. This information will be monitored and revised upon the next biennial submittal to be submitted along with the Agency Budget Request. The DPBH is aware of the constant demographic changes in Nevada. This is the reason DPBH will go above and beyond providing language services. The annual cost for the provision of the language services is estimated at \$1,500,000.00. This amount includes the cost for 1) Translation services, 2) system enhancements, 3) IT staff costs, and 4) Interpreter Services.

Legislative Recommendations

The following legislative recommendations and revisions to Senate Bill 318 are based on the current requirements of language access and experience in developing this language access plan.

- Offer diversity and language interpretation training to be provided by the Office of Employee Development on a State-wide basis
- Align requirements with the existing federal language access plan requirements
- Define and outline the parameters to measure and collect English Proficiency level for population of focus
- Provide LEP resources including “I speak” cards and LAP procedures for all agencies to be consistent across programs
- Clarify requirements for dual-role interpreters to be consistent across the Nevada Revised Statutes 232 and Senate Bill 318
- Add information regarding assistive technology and visual language requirement for individuals with disabilities.

Appendix A
Key Terms and Definitions

| Term | Definition |
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| Limited English Proficiency (LEP) | A person with limited English proficiency is unable to speak, read, write, or understand the English language at a level that permits them to interact effectively with State Agencies. Individuals who communicate through American Sign Language are included in this definition. On the Census, a LEP person is someone who self-assesses as speaking English less than “very well”. May also be called English Language Learner. |
| <u>Language Access:</u> | Effective strategies to engage and communicate with residents, acknowledging language is not a barrier. Residents have opportunities for meaningful access to participate in State Agency’s services, programs, and activities. |
| <u>Language Access Plan (LAP)</u> | A set of policies and procedures established by each agency of the Executive department of the State |

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| | Government to provide the most effective services for individuals with limited English proficiency. |
| <u>Meaningful Access:</u> | An agency provides meaningful access to its programs when the language assistance provided is accurate, timely and effective and is at no cost to the LEP individual. It is also the ability of an LEP to access, apply and receive resources without significant restrictions from language barriers. |
| <u>Bilingual Fluency:</u> | The ability to speak and understand two languages easily and accurately. Bilingual fluency does not always mean that a person can serve as an interpreter or translator. Note that some bilingual persons are native speakers but have never attended school for the non-English language. |
| <u>Primary Language:</u> | The dominant language used by a person for communication. The language in which a limited English proficient individual chooses to communicate with others. |
| <u>Interpretation:</u> | The oral delivery of a spoken message from one language to another without changing the original message or meaning. There are various types of interpretation, including: simultaneous interpretation, consecutive interpretation, summary interpretation, and whispered interpretation. |
| <u>Certified Interpreter:</u> | A certified interpreter is an interpreter who has passed a valid and reliable certification exam administered by an independent entity such as the Supreme Court of Nevada Administrative Office of the Courts. Private companies that give tests to their contract interpreters may then call those interpreters certified, but most people outside those companies do not recognize such credentials. Individuals who complete certificate programs in interpreting may be qualified, but they are not certified. |
| <u>Dual-Role Interpreter</u> | A bilingual employee who has been tested for language skills and is trained as an interpreter and who assumes the task of part-time interpreting as a component of their formal duties. |
| <u>Translation</u> | The conversion of communication from one language to another in written form. An accurate translation is one that conveys the intent and essential meaning of the original text. Accurate sometimes does not mean literal. |
| <u>Safe Harbor</u> | A “safe harbor” means that if a recipient provides written translations |

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| | <p>under the outlined circumstances, such action will be considered strong evidence of compliance with the recipient's written-translation obligations. Per federal guidance, a safe harbor has been created for grantees to ensure with greater certainty that they comply with their obligations to provide written translations in languages other than English. These safe harbor provisions apply to the translation of written documents only. They do not affect the requirement to provide meaningful access to LEP individuals through competent oral interpreters where oral language services are needed and are reasonable.</p> |
| Refugees | <p>Refugees are individuals who were forced to flee their home countries because they were unable to count on the protection of their government.</p> |
| <u>Primary Language</u> | <p>Primary languages are languages other than English spoken at home by the largest number of people who live in the State of Nevada.</p> |
| <u>Indigenous:</u> | <p>Any group of people native to a specific region. It refers to people who lived before colonists or settlers arrived, defined new borders, and began to occupy land</p> |
| <u>Health Literacy</u> | <p>Preferred Language: A preferred language is the self-identified language that the individual prefers or requests to use in a service or encounters. The preferred language does not necessarily signify the client's native or primary language as the individual could prefer or request to use English despite it not being their native language.</p> |
| <u>Vital Documents</u> | <p>Documents that provide essential information for accessing basic State services and benefits. Examples include applications, consent, and complaint forms, notice of rights, notice of activities, and notices advising of the availability of free language assistance.</p> |
| <u>"I speak" Cards</u> | <p>Also known as Language Identification Cards that help identify what language an individual speaks, and to identify what language an interpreter will need to speak to communicate effectively with that individual.</p> |

Appendix B
Acronyms

| Acronym | Term | Definition |
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| ADA | American Disabilities Act | The Americans with Disabilities Act (ADA) became law in 1990. The ADA is a civil rights law that prohibits discrimination against individuals with disabilities in all areas of public life, including jobs, schools, transportation, and all public and private places that are open to the general public. |
| DPBH | Division of Public and Behavioral Health | Nevada DPBH is within the Nevada Department of Health and Human Services. Due to the passage of Assembly Bill 488, mental health and public health have merged to become the DPBH Developmental Services have been consolidated into the Division of Aging and Disability Services. |
| DHHS | Department of Health and Human Services | The Nevada Department of Health and Human Services (DHHS) promotes the health and well-being of its residents through the delivery or facilitation of a multitude of essential services to ensure families are strengthened, public health is protected, and individuals achieve their highest level of self-sufficiency. The Department is the largest in state government, comprised of five Divisions |

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| | | along with additional programs and offices overseen by the DHHS' Director's Office. The Department's Director, Richard Whitley, was appointed by Governor Steve Sisolak and manages nearly one-third of the state's budget. |
| LAP | Language Access Plan | A document that spells out how to provide services to individuals who are non-English speaking or have limited English proficiency. |
| LEP | Limited English Proficiency | If English is not your primary language and you have difficulty communicating effectively in English, you may need an interpreter or document translation to have meaningful access to programs funded by DPBH. Title VI of the Civil Rights Act of 1964 requires recipients of Federal financial assistance to take reasonable steps to make their programs, services, and activities accessible by eligible persons with limited English proficiency. |
| SB 318 | Senate Bill 318 | This Senate Bill 318 makes various changes relating to improving access to governmental services for persons with limited English proficiency. SB 318 states "the Division shall take reasonable steps to ensure that persons with limited English proficiency who are eligible to receive services from the Division." |
| IDEA | Individuals with Disabilities Act | The Individuals with Disabilities Education Act (IDEA) is a law that makes available a free appropriate public education to eligible children with disabilities throughout the nation and ensures special education and related services to those children. |
| NRS | Nevada Revised Statutes | The current codified laws of the State of Nevada. The Statutes of Nevada are a compilation of all legislation passed by the Nevada Legislature during a particular Legislative Session. |
| MSA | Master Service Agreement | Contract between two or more parties that established the terms and conditions that will govern all current, future activities and responsibilities. Nevada State Purchasing provides a list of MSA's, including for Language services. |
| CART | Communication Access Realtime Translation | The Nevada Interpreter/CART Registry (the Registry) is a list of sign language interpreters and Communication Access Realtime Translation (CART) providers (NRS 656A.080) who meet the minimum qualifications in this State as required by Nevada Revised Statute (NRS) 656A (NRS 656A.100). All sign language interpreters and CART providers must be registered in order to practice in the State of Nevada (NRS 656A.800). |

Appendix C
DPBH Language Access Services and Resources

| DPBH Language Access Services | |
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| <i>Services</i> | <i>Contact Information</i> |
| Written Translation | <u>Nevada State MSA Translation/Interpretation Service</u> |
| On-Demand Remote Language Interpreting (phone) | CTS Language Link <u>Nevada State MSA Translation/Interpretation Service</u> |
| Sign Language Interpreter | <u>Nevada State MSA Translation/Interpretation Service</u> |
| Bilingual Interpreter | <u>Nevada State MSA for Temporary Staff - Bilingual Interpreters</u> |
| CART – Communication Access Real-time Transcription | <u>Nevada State MSA Translation/Interpretation Service</u> |
| “I speak” Cards | All “I speak” cards will be available online and in-person. |
| External Language Services and Providers | Northern Nevada International Center |

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